



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent No.:

7,083,123

Issue Date:

August 1, 2006

Patentee:

Jean-Claude Molla

Title:

INTERNAL FLAME GAS BURNER WITH HIGH

COMPACTNESS.

Attorney Docket:

4067-000012/US

ON CKHLSK

0000157592

FFEM Refund Total:

\$270.00

Mail Stop: DAC Office of Petitions

Commissioner for Patents

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Alexandria, Virginia 22313-1450

cata: 05/29/2007 CKHLOK CNEUYEN 00000011 708312

CKHLOK

0000157593

STEEK Refund Total:

\$100.00

PETITION TO CORRECT ASSIGNEE INFORMATION

Sir:

Patentee petitions under the provisions of 37 CFR 1.183 to correct the Assignee data in the above-identified patent.

Specifically, the Assignee, Gaz De France, having a previous address of:

361 Avenue du President Wison

B.P. 33

93211 Saint-Dennis La Plaine Cedex, France

recorded on Reel/Frame: 015424 /0652 dated June 2, 2004 now having a new address

of:

 $\mathcal{H}_{\mathcal{A}}$

10/18/2006 CNGUYEN 00000011 7883123

23, rue Philibert Delorme 75017 Paris, France

81 FC:1462

400.00 OP 1

The petition fee under 1.17(f) in the amount of \$400.00 is enclosed. 88888811 7883123

400.00 OP

02 FC:1811

100.00 OP V

00000007 7083123

130,00 OP

Patentee also encloses is a Request for Certificate of Correction and fee.

Acceptance and entry of the Petition to Correct Assignee's address and the issuance of a Certificate of Correction is respectfully requested.

Respectfully submitted,

Dated: __Other 16, 2006

Robert M. Siminski, 36007

HARNESS, DICKEY & PIERCE, P.L.C. P.O. Box 828 Bloomfield Hills, Michigan 48303 (248) 641-1600

RMS/jao

UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
Date of Request: 05/25/07 2 Seria			tent	#	7,083,123
3 Please refund the following fee(s):		4 PAI NUN	PER IBER	5 DATE FILED	6 AMOUNT
Filing					\$
Amendment					\$
Extension of Time			· · · · · · · · · · · · · · · · · · ·		\$
Notice of Appeal/Appeal					\$
X Petition		WFEE		10/16/06	\$ 270.00
Issue					\$
X Cert of Correction/Terminal Disc.		WFEE		10/16/06	\$ 100.00
Maintenance					\$
Assignment					\$
Other					\$
		7 TOTAL AMOUNT OF REFUND			\$ 370.00
		8 TO BE REFUNDED BY:			
10 REASON:		X Treasury Check			
X Overpayment			C	redit Dep	osit A/C #:
Duplicate Payment			9		
No Fee Due (Explanation):					
Also, Certificate of Correction not in order.					

11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: Andrea Smith			T	ITLE: F	Petitions Examiner
SIGNATURE: /Andrea Smith/		···	P	HONE:	2-3226
OFFICE: Office of Petitions ***********************************					
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Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

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